

# Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

<b>1. Agency Name</b> City of San Jose Division, Department, or Region (if applicable) Council District 10 Designated Agency Contact (Name, Title) Shane Patrick Connolly, Chief of Staff Area Code/Phone Number 408-535-4910 E-mail district10@sanjoseca.gov		Date Stamp San Jose City Cl OTC 2019 APR 26 PM 3:24 California Form <b>802</b> For Official Use Only <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: 04/26/2019 (month, day, year)
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## 2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 201.00

Event Description: Sharks v. Avalanche playoff game Date(s) 04 / 26 / 19  
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Khamis, Johnny  
Official's Name (Last, First)

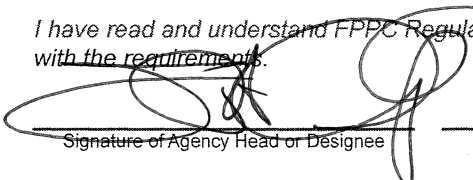
## 3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Volunteers for July 4th Family Fun Festival & Fireworks event c/o Alan Vonderwerth, lead	8	Recognition for volunteer activities related to annual City-sponsored July 4th event in District 10

## 4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.


 Signature of Agency Head or Designee
 Shane Patrick Connolly
 Print Name
 Chief of Staff
 Title
 04/26/2019
 (month, day, year)

Comment: \_\_\_\_\_